EXECUTIVE LOBBYING EXPENDITURE REPORT FORM 507			#5/ Executive Lobbyist Registration No.			
COVERING JANUARY 1 - RUNE 30	DUE AUGUST 1	. j'				
COVERING JANUARY 1 - DECEMBER 31	2008 - DUR PER	RUARY 15		POR OFFICE USE ONES		
Mail to: the Board of Sthics, 2415 Quail Dr., 3rd Fl	oor, Baton Rouge, I	.A 70808		Ex2-3/15		
<u>Pax to:</u> (225)763-8787 or (225)763-8780		+	- İ	2072648		
1. Name Harn's	First	F,		İ		
2. Business Address: 501 Qural Street and No.	street But	r Rouge LA	<u>7980]</u>			
Mailing Address Salme as above						
3. Business Phone 235.344.0381 Area Code and Telephone Number						
4. Total of all executive lobbying expenditures made facuary 1 through June 30: 3						
 Total of all executive lobbying expenditures n (When Applicable) (Include expenditures from 		December 31: \$	<u>Ø</u>			
 Total of all executive lobbying expenditures of (Line 4 added to Line 5 should equal Line 6) 	rade during calendar	r year: \$	9_			
7. Did you make an expenditure exceeding \$50 on one occasion for an executive branch official:						
From January 1 through June 30? From July 1 through December 31?	Yes 🔲 Yes 🔲	No D	NA 🗀			
If the answer to either question in Number 7	above is YES, compl	lete Schedule A und s	ttach.			
8. Did you make expenditures exceeding the sum of \$250 for an executive branch official:						
From July 1 through June 30? From July 1 through December 31?	Yes 🔲 Yes 🔲	No 🗹 No 🐼	AK. □			
If the enswer to either question in Number 8	above is YES, comple	ete Schedule A and a	ttach.			
Did you expend funds for any reception, social officials were invited during this reporting per		function to which π	ore than twenty-	five executive branch		
Yes []	*• ₽				
If the answer to Number 9 above is YES, complete Schedule B and attach. Form 507, Rev. 703 Page 1 of 2						
Form 507, Rev. 7/D4	Page 1 o	42	· want	ULLIVERER		

2}	a. Name of Department and Individual Agency:	
	b. Total of all expenditures made January 1 through June 30:	s
	c. Total of all expenditures made July 1 through December 31: (When applicable)	8
	d. Total of all expenditures made during the calendar year:	\$
3)	a. Name of Department and Individual Agency:	
	b. Total of all expenditures made January 1 through June 30:	\$
	 c. Total of all expenditures made July 1 through December 31; (When applicable) 	3
	d. Total of all expenditures made during the calendar year:	s

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

